

*Adopted by NDEP Steering Committee December 7, 2004*

**NATIONAL DIABETES EDUCATION PROGRAM  
STRATEGIC PLAN  
October 2005 – September 2007  
(FY 2005-2007)**



**Introduction**

The National Diabetes Education Program (NDEP), founded in 1997, is a federally-sponsored initiative that involves public and private partners to improve the treatment and outcomes for people with diabetes, to promote early diagnosis, and to prevent the onset of diabetes. The U.S. Department of Health and Human Services' National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) of the National Institutes of Health (NIH) and the Division of Diabetes Translation of the Centers for Disease Control and Prevention (CDC) jointly sponsor the program with the participation of over 200 partner organizations.

The program has created three broad-based, award-winning outreach efforts and unique resources for several key audiences:

**Key NDEP Campaigns:**

- *Control Your Diabetes. For Life.*
- *Be Smart About Your Heart. Control the ABCs of Diabetes: A1C, Blood Pressure, and Cholesterol.*
- *Small Steps. Big Rewards. Prevent type 2 Diabetes.*

**Key NDEP Resources:**

- For Health Care Providers – *[www.betterdiabetescare.nih.gov](http://www.betterdiabetescare.nih.gov)*
- For Business Leaders – *[www.diabetesatwork.org](http://www.diabetesatwork.org)*
- For Children, Parents, and School Personnel – *Helping the Student with Diabetes Succeed*

Since its inception, NDEP has implemented a strategic planning process that incorporates obtaining input and guidance from the program's steering committee and work group members on future directions and priority activities. The 2005-2007 strategic plan, the NDEP's third, is the outcome of this same process and is intended to:

- Set program priorities for the next three years—i.e., Federal government fiscal years (FY) 2005, 2006, and 2007.
- Provide a blueprint for implementing and coordinating activities affecting different audiences and engaging different partners.
- Establish a framework for evaluating the program's activities and accomplishments.

### **Program Goal**

The goal of the NDEP is to reduce the illness and deaths associated with diabetes and its complications through five principle objectives:

- Increasing awareness of the seriousness of diabetes, its risk factors, and strategies for preventing diabetes and its complications among high risk groups
- Improving understanding about diabetes and its control and promoting better self-management behaviors among people with diabetes
- Improving health care providers' understanding of diabetes and its control and promoting an integrated approach to care
- Promoting health care policies that improve the quality of and access to diabetes care
- Reducing disparities in health in racial and ethnic populations disproportionately affected by diabetes

### **Target Audiences**

The NDEP's target audiences include:

- People with diabetes and their families, with special attention to Hispanic and Latino Americans, African Americans, Asian Americans, Pacific Islanders, American Indians, Alaska Natives and older adults.
- People at risk for type 2 diabetes, especially those with pre-diabetes, with special attention to populations at high risk.
- Health care providers, with an emphasis on outreach to the full team engaged in providing care for people with diabetes and pre-diabetes.
- Health care payers, purchasers, and policy makers.

### **Program Strategies**

Five strategies guide the NDEP's information and education activities:

- Create program partnerships with other organizations concerned about diabetes and the health status of their constituents.
- Develop and implement ongoing diabetes awareness and education activities.
- Identify, develop, and disseminate educational tools and resources for people with diabetes and those at risk, including materials that address the needs of special populations.
- Disseminate guiding principles that promote quality diabetes care.
- Promote policies and activities to improve the quality of and access to diabetes care.

### **Key Program Messages**

The NDEP emphasize three key messages in its communications to consumers and health professional audiences. These messages, based on the current science and epidemiology related to diabetes, are tailored and adapted for specific audiences in program materials and mass media products.

- *Control Your Diabetes. For Life.* – Diabetes is serious, common, costly, yet controllable.

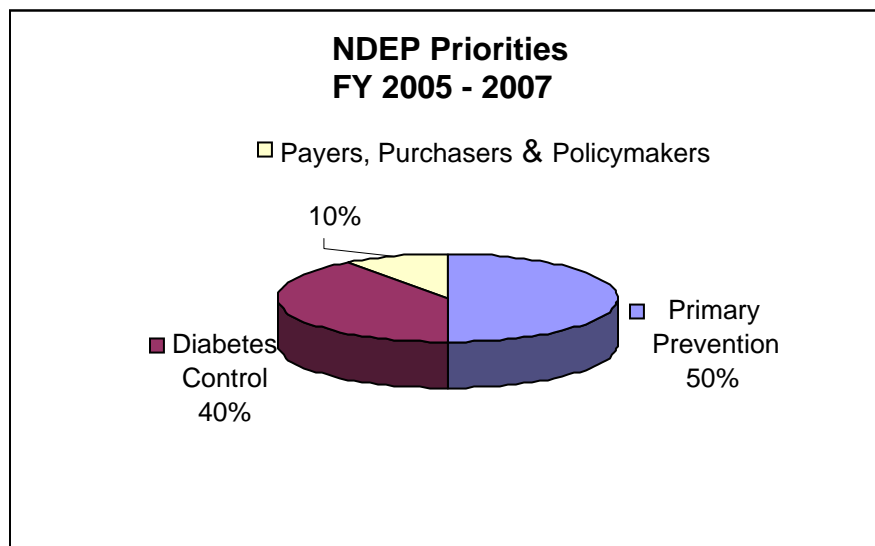
- *Be Smart About Your Heart. Control the ABCs of Diabetes: A1C, Blood Pressure, and Cholesterol* – Two out of three people with diabetes will die of cardiovascular disease-related (CVD) complications. You can reduce your risk of CVD by controlling your blood glucose, blood pressure, and cholesterol.
- *Small Steps. Big Rewards. Prevent type 2 Diabetes.* – People at high risk for diabetes can prevent or delay onset of the disease by losing 5 to 7 percent of body weight through modest lifestyle changes such as a low-fat diet and 30 minutes of exercise 5 days a week.

### Program Directions for FY 2005 Through 2007

The NDEP Steering Committee considered several challenges in determining how NDEP should allocate resources – financial, staff, and volunteer time and talent – across four broad topics during FY 2005 through 2007:

- Primary prevention of diabetes – through the *Small Steps. Big Rewards.* campaign and related efforts
- Diabetes control or the prevention of complications due to diabetes – through the *Be Smart About Your Heart. Control the ABCs of Diabetes* campaign and related efforts
- Detection of undiagnosed diabetes, emerging as an important issue by the U.S. Department of Health and Human Services – through the *Diabetes Detection Initiative. Finding the Undiagnosed*
- Addressing issues such as making the economic case for quality diabetes care associated with health care payers, purchasers, and policymakers

The NDEP's directions for FY 2005 - 2007 are reflected in the following chart, which allocates 50 percent of resources to primary prevention, 40 percent to diabetes control, and 10 percent to payer and purchaser issues.



The NDEP Steering Committee agreed on NDEP's priorities for FY 2005 - 2007 after considering these issues:

- Detection is important, but can be addressed through prevention and control efforts. Prevention, in particular, where the outreach message encourages anyone with risk factors to talk to their health care provider about their risk for diabetes, is an effort where a strong detection message can be linked. The audiences for prevention and detection are identical.
- Diabetes control remains critically important. It includes outreach to people with diabetes and their social supporters, to health care providers and health care systems ([www.betterdiabetescare.nih.gov](http://www.betterdiabetescare.nih.gov) and other tools and reports), and to business leaders ([www.diabetesatwork.org](http://www.diabetesatwork.org) and other tools and reports).
- The payer-purchaser-policymaker outreach emerges as a focused effort to make the economic case for treating pre-diabetes and diabetes. Partner organizations may be able to utilize the information in a variety of formats to meet their missions.

In addition, the Steering Committee focused on how NDEP should balance outreach to different audiences as the program addresses prevention, control, and payer-purchaser issues. The discussions addressed outreach on prevention and control; the payer-purchaser program does not present similar challenges of balancing audiences.

- There is a clear and high priority on outreach to people at risk (prevention), people with diabetes (control), and health care providers. Members strongly recommended that more than 50 percent of NDEP's outreach should be aimed directly at people with diabetes, people at risk for diabetes, and their health care providers.
- Health care systems also are seen as critical players. If the "system" is not set up to provide optimal care, efforts to reach affected individuals and their health care providers will not be as effective.
- Other audiences, such as community leaders, business leaders, and family members of those affected, will be important in several ways. In some cases, they are credible conduits for delivering messages to individuals and health care providers. In other cases, such as business leaders, they can play a key role in both delivering information to individuals and in seeking systems of care – insurers – that meet the needs of their employees with diabetes. In these instances, the balance of outreach to selected audiences will depend on the specific goals and strategies of the campaign, intervention, or outreach program.

NDEP outreach strategies – particularly through work groups – will be organized around target audiences. As NDEP seeks to reach consumer audiences – people with diabetes and people at risk for diabetes – both diabetes control and diabetes prevention messages will be disseminated and promoted. For example, when NDEP promotes resources to health care providers, both the *BetterDiabetesCare* website that provides resources for

systems change for treating people with diabetes and the GAME PLAN Toolkit that provides practical tools to engage patients in diabetes prevention will be disseminated and promoted.

NDEP's outreach strategies will:

- Utilize partnerships, promotions, and media outreach to continue building awareness about diabetes prevention and control and to educate consumers – people with diabetes, people at risk for diabetes – about the steps they need to take to improve diabetes control and/or prevent the onset of diabetes. Particular attention will be focused on outreach to Hispanic and Latino Americans, African Americans, Asian Americans, Pacific Islanders, American Indians, Alaska Natives, and older adults.
- Utilize partnerships, promotions, and media outreach to continue to build awareness about diabetes prevention and control and to educate health care providers – with an emphasis on outreach to the full team engaged in providing care for people with diabetes and pre-diabetes – on actions they can take to improve systems of care and use NDEP's tools to support patient care and interventions for people with diabetes and those at risk for diabetes.
- Utilize partnerships, promotions, and media outreach to reach health care payers, purchasers, and policymakers with information that enhances their ability to evaluate choices and reach decisions that improve care for people with diabetes and those at risk for developing diabetes.

The following sections present highlights of how NDEP work groups will address these strategies over the next three years. Work groups have developed detailed plans, including responsibilities that individual volunteers have agreed to take on; these will be tracked over the 3-year period to ensure that the vision of NDEP's Steering Committee comes to life.

## **OUTREACH STRATEGY #1 OUTREACH TO PEOPLE WITH DIABETES AND PEOPLE AT RISK FOR DIABETES**

**Utilize partnerships, promotions, and media outreach to continue building awareness about diabetes prevention and control and to educate consumers – people with diabetes and people at risk for diabetes – about the steps they need to take to improve diabetes control and/or prevent the onset of diabetes. Particular attention will be focused on outreach to Hispanic and Latino Americans, African Americans, Asian Americans, Pacific Islanders, American Indians, Alaska Natives, and older adults.**

### **1. Create partnership opportunities and conduct outreach activities.**

The NDEP staff will continue to develop Memoranda of Understanding (MOUs) with Steering Committee and other key organizations to delineate areas of cooperation and partnership. Partnership activities in the MOUs will include scheduling NDEP presentations at the annual meetings of Steering Committee organizations, articles in journals and newsletters, website links, and unique opportunities for collaboration on activities and events to promote NDEP resources. NDEP plans to continue to work with the American Diabetes Association (ADA) and the American College of Cardiology (ACC) to promote the link between diabetes and cardiovascular disease and the importance of controlling the ABCs of diabetes.

Following are highlights of NDEP work group plans for partnership development and outreach activities.

Using the theme, “Each One, Reach/Bring One,” the **African American Work Group** plans to identify partnership opportunities with organizations that would provide increased access to the following communities: women, men, children, faith, medical, business, and education. NDEP would train facilitators in partner organizations to promote and deliver the *Small Steps. Big Rewards.* message and programs. National organizations will host NDEP workshops at their annual meetings.

**Hispanic/Latino Work Group** members will identify community-level initiatives in their states that will help to disseminate NDEP messages to Hispanics/Latinos. In addition, the work group will recruit corporate partners to support printing and distribution of NDEP materials such as the *Diabetes Meal Planner* and the *MOVIMIENTO* CD.

The **Asian American and Pacific Islander (AAPI) Work Group** will disseminate the translated diabetes prevention and control materials and conduct community outreach activities through health fairs and screenings in locations such as New York, Dallas, and American Samoa. The work group will ensure that community groups in their geographic areas are aware of NDEP's resources for AAPIs. In-language

newsletters will be distributed through local pharmacies, doctors' offices, and health fairs.

In addition, the AAPI work group plans to collaborate with the DPCPs, Diabetes Coalitions, professional organizations such as diabetes educators, dieticians, and nurses, and hospitals and primary care clinics.

The **American Indian and Alaska Native Work Group** will disseminate the diabetes prevention campaign materials to Indian health programs, tribes, and communities and will hold workshops or technical assistance sessions on using the materials.

The **Older Adults Work Group** plans to expand outreach to older adults by partnering with organizations they have links to such as the National Council of Women's Organizations, Active for Life, AARP, Centers for Medicare and Medicaid Services Partners Network, Health Ministries, and the National Association of Area Agencies on Aging. Work group members will identify additional potential partners for outreach.

The **Diabetes in Children and Adolescents Work Group** plans to conduct outreach about diabetes and obesity prevention to youth organizations such as the 4H Clubs, National Honor Society, Key Club, and Scouts organizations.

## **2. Conduct media outreach to build awareness of diabetes prevention and control.**

NDEP staff will continue to promote the program's key prevention and control messages by placing stories and public service ads in television, radio, and print media to reach high risk groups. For example, NDEP will continue to conduct promotions during the various "Heritage Months" that honor African Americans, Hispanic/Latinos, Asian Americans and Pacific Islanders, and American Indians. The program will plan and implement radio and print media tours for special promotions such as the link between diabetes and cardiovascular disease or new research findings in diabetes prevention. NDEP will disseminate promotional messages and materials to the DPCPs and other NDEP partners so they can replicate these promotions at the state and local level.

**Hispanic/Latino Work Group** members will look out for media opportunities such as TV, radio, or print news stories to feature NDEP's Hispanic/Latino products.

**Asian American and Pacific Islander (AAPI) Work Group** members will utilize in-language newspapers, radio programs, diabetes education television programs, and special promotions on Diabetes Alert Day in March and in celebration of National Diabetes Awareness Month in November. They will also place NDEP messages in health plan magazines and monthly newsletters to consumers and physicians.

To address the digital divide in Pacific Islander communities, the AAPI Work Group will create more opportunities to link the PI communities electronically to the NDEP

website. They also will use web-based spoken formats to reach limited English-speaking populations who have high levels of illiteracy.

The **American Indian and Alaska Native Work Group** will increase/extend outreach for the "We Have the Power" diabetes prevention campaign.

The **Older Adults Work Group** plans to promote the "It's Not Too Late to Prevent Diabetes" campaign and the American Society on Aging's diabetes prevention module as a resource for health care and aging professionals. When the kit is revised, work group members will promote the "Power to Control Diabetes" campaign.

### **3. Develop, finalize, and disseminate diabetes prevention and control materials and resources.**

The **African American Work Group** will pilot test, finalize, and produce *Health and Fitness: It's a Family Affair*. This community intervention kit can serve as a model for other work groups to promote diabetes prevention and control to their target audiences.

The **Hispanic/Latino Work Group** will complete a "Movimiento" music video to complement the music CD and to provide an additional teaching tool for community organizations.

The **Asian American and Pacific Islander Work Group** will finalize, distribute, and evaluate the capacity-building toolkit and other community intervention products that reach CBOs serving Asian American and Pacific Islander populations with, or at risk for, diabetes. In addition, they will complete, disseminate, and evaluate the Southeast Asian position paper (see Strategy #3).

The **American Indian and Alaska Native Work Group** plans to revise its *Move It!* campaign packets for American Indian and Alaska Native youth based on the evaluation of its use by Bureau of Indian Affairs schools. The revised packets will be disseminated to Indian Health Service Diabetes Prevention Programs and to a broader list of Indian schools for the second wave of the campaign. The work group plans to create a CD or website for their diabetes prevention and control materials so they can be customized and used by different audiences, including young people. The work group will also develop tailored messages about the link between diabetes and cardiovascular disease and the importance of controlling the ABCs of diabetes.

The **Older Adults Work Group** will adapt and utilize other high risk work groups' campaign materials for the older adult audience and promote them to their respective organizations. In addition, they will update and revise "The Power to Control Diabetes Is in Your Hands" kit for seniors who have Medicare benefits.

The **Diabetes in Children and Adolescents Work Group** will translate, pretest, and promote Spanish versions of the "Kids with Type 2 Diabetes" tip sheets. A key initiative for this work group will be to develop and disseminate messages and



resources for families about diabetes/obesity prevention and management in children and adolescents. As part of this effort, they will create a tool to help parents know whether their child is at risk for having diabetes (see also Strategy #2). The work group also will review other work groups' activities designed for children and adolescents such as the *Move It!* packets and they will determine how to use and promote the African American Work Group's forthcoming *Health and Fitness* community intervention kit designed to help families make behavior changes around food and physical activity. Finally, the children's work group will collaborate with the Health Care Providers Work Group to develop messages about prevention of type 2 diabetes in at-risk women with prior gestational diabetes (see Strategy #2).

The **Business and Managed Care Group** will add Spanish-language fact sheets to the *diabetesatwork.org* website's lesson plans.

## **OUTREACH STRATEGY #2 OUTREACH TO HEALTH CARE PROVIDERS**

**Utilize partnerships, promotions, and media outreach to continue to increase awareness about diabetes prevention and control and to educate health care providers – with an emphasis on outreach to the full team engaged in providing care for people with diabetes and pre-diabetes – on actions they can take to improve systems of care and use NDEP's tools to support patient care and interventions for people with diabetes and those at risk for diabetes.**

### **1. Create partnership opportunities and conduct outreach activities.**

The NDEP staff will continue to develop Memoranda of Understanding (MOUs) with Steering Committee organizations to delineate areas of cooperation and partnership. Partnership activities in the MOUs will include scheduling NDEP presentations at the annual meetings of Steering Committee organizations, articles in journals and newsletters, website links, and unique opportunities for collaboration on activities and events to promote NDEP resources to health care providers.

The **Pharmacists, Podiatrists, Optometrists, and Dentists (PPOD) Work Group** will give presentations and conduct seminars and workshops at health professional meetings on use of the PPOD Primer, *Working Together to Manage Diabetes: A Guide for Pharmacists, Podiatrists, Optometrists, and Dental Professionals*.

The **Health Care Providers Work Group** plans to conduct workshops at meetings of various health care disciplines to introduce attendees to the content and use of the *BetterDiabetesCare* website. The group also will explore using a “train the trainer” model for their workshops in order to reach a wider audience, including minority health care professionals.

The **Diabetes in Children and Adolescents Work Group** will approach up to ten health care professional organizations whose members would benefit from knowing about and using NDEP materials for children and teens, including family physicians, pediatricians, pediatric nursing, and pediatric specialty groups. The work group will identify opportunities for partnering with these groups and speaking at their annual meetings. The group also will collaborate with WIN (NIDDK) and CATCH (NHLBI) to promote materials helpful to children with diabetes. NDEP will create a speaker's kit for work group members to use when giving presentations to colleagues at the national or local level.

In addition, the **Diabetes in Children and Adolescents Work Group** will seek to develop partnerships around the issue of diabetes and obesity prevention and management. The group will explore creating a forum for discussing pediatric obesity, perhaps in the form of convening a summit. They will collaborate with the

American Academy of Pediatrics' Obesity Task Force and review/support the Pediatric Endocrine Society's consensus statement about childhood obesity.

**2. Conduct media outreach to build awareness of NDEP's diabetes prevention and control messages and resources.**

The **PPOD Work Group** will promote the PPOD Primer, through organizations that represent and/or reach pharmacists, podiatrists, optometrists, and dental professionals, by placing articles and messages in newsletters, journals, and web links. The group also will involve the DPCPs and the CDC's state Oral Health Programs in promoting the guide.

Members of the **Health Care Providers Work Group** will continue to promote the *BetterDiabetesCare* website through announcements and articles in their organizations' newsletters, journals, and websites. A special promotion effort will be launched when the website begins to offer Continuing Medical Education (CME) or CEU credits. The work group will collaborate with other NDEP work groups to promote the website to minority health care professional groups. They will also place articles in health plan updates to providers via the DPCPs and the National Managed Care Association.

The **Diabetes in Children and Adolescents Work Group** plans to continue to promote NDEP's resources related to children and diabetes through their own organizations' channels and to other related disciplines. The group will adapt the articles it has written for *School Nurse News* on managing diabetes in young people and adapt them for placement in other publications and on the NDEP website.

**3. Develop, finalize, and disseminate diabetes prevention and control materials and resources.**

Under the leadership of the **Diabetes Prevention Program Translation Committee**, and working closely with other work groups serving health care professionals, NDEP will revise the *Small Steps. Big Rewards. GAME PLAN Toolkit* in light of new clinical advances and the new definition of pre-diabetes.

The **PPOD Work Group** will develop and disseminate materials to complement the *GAME PLAN Toolkit* to create awareness of and to promote diabetes prevention counseling by health care professionals in the PPOD disciplines.

The **Health Care Providers Work Group** will conduct annual reviews and updates of the *BetterDiabetesCare* website. The work group also will collaborate with Indiana University School of Medicine to offer Continuing Medical Education (CME) and CEU credits for self-directed learning using the *BetterDiabetesCare* website.

The **Health Care Providers Work Group** will collaborate with the **Diabetes in Children and Adolescents Work Group** to develop and promote messages and information about preventing type 2 diabetes in women who have had gestational diabetes (GDM). An expert subcommittee will be formed to review the latest

research on this topic and to develop key messages for counseling mothers post-GDM about their own and their child's increased risk for type 2 diabetes. Target audiences for this prevention message will include: mothers with a history of GDM and their offspring, family physicians, pediatricians, nurse practitioners, physician assistants, registered nurses, dietitians, obstetricians, gynecologists, and PPOD providers.

The **Diabetes in Children and Adolescents Work Group** will develop and promote messages and resources for health care providers about diabetes prevention and obesity prevention and management in children and adolescents aimed at moving providers from awareness to action. The group will review existing messages and materials to avoid duplication of what is already available and tailor messages, especially for pediatricians and lay health workers, to make it easier for them to counsel parents and children about healthy lifestyle behaviors.

### **OUTREACH STRATEGY #3 OUTREACH TO PAYERS, PURCHASERS, AND POLICYMAKERS**

**Utilize partnerships, promotions, and media outreach to reach health care payers, purchasers, and policymakers with information that enhances their ability to evaluate choices and reach decisions that improve care for people with diabetes and those at risk for developing diabetes.**

- 1. Create a mechanism – a white paper, conference/meeting, or other initiative – to gather existing research on the economic impact and costs of treating (or not treating) pre-diabetes and diabetes.**

This initiative is intended to identify and assemble in one place all existing data and studies, establish clear consensus messages based on the data, and identify areas where further research is needed.

- Establish an ad hoc task force to define the scope of work and timeline.
- Engage representatives from other NDEP work groups, such as Health Care Providers, Business and Managed Care, and PPOD, to ensure that the economic case for treatment and primary prevention of diabetes and its complications includes available data and expertise from these perspectives.

- 2. Increase awareness, visibility, and use of *diabetesatwork.org* as a diabetes prevention and management resource for employers.**

The **Business and Managed Care Work Group** plans to promote the website through e-mail letters to their business contacts, through presentations at business meetings, and through promotion to leading experts on worksite productivity and management. To help promote *diabetesatwork.org* through the Diabetes Prevention and Control Programs and other NDEP partners, the work group will develop a toolkit for conducting workshops in their states.

Each year, the Business and Managed Care Work Group will collaborate with another NDEP work group on awareness activities and on workshops about the website. For example, the group plans to collaborate with the Hispanic/Latino Work Group to conduct outreach to Hispanic/Latino employers. They will develop a workshop and tailor e-mail letters to this audience to introduce them to *diabetesatwork.org*.

The group will explore partnering with the American Association of Occupational Health Nurses (AAOHN) to offer continuing education credits. They will increase website visibility by increasing the number of links on worksite productivity and occupational health websites such as the National Business Coalition on Health, Alliance of Community Health Plans, and the National Committee on Quality Assurance.

Planned content revisions to the site include adding summaries on best practices, disease management modules, and more economic information, adding Spanish-language fact sheets, and making existing NDEP products more accessible.

Finally, the Business and Managed Care Work Group will take the lead on working with NDEP to create an NDEP “marketing” piece that includes a summary of

NDEP's publications and tools and disseminate it to health plans/payers and purchasers with suggested ways they can use the whole array of NDEP materials.

**3. Conduct information and education activities that help to reduce racial and ethnic disparities.**

The **Asian American and Pacific Islander Work Group** will educate and create awareness among policymakers and public health leaders on the importance of obtaining data for all AAPI populations as a baseline to evaluate the size and scope of the diabetes problem faced by these groups.